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Bib Data Sheet

CONFIRMATION NO. 2343

<b>SERIAL NUMBER</b> 10/008,218	<b>FILING DATE</b> 12/06/2001 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2151	<b>ATTORNEY DOCKET NO.</b> 6851-2 CIP2
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**APPLICANTS**

Ron M. Redlich, Miami Beach, FL;  
Martin A. Nemzow, Miami Beach, FL;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A CIP OF 09/916,397 07/27/2001  
WHICH CLAIMS BENEFIT OF 60/260,398 01/09/2001 \*  
AND CLAIMS BENEFIT OF 60/287,813 05/02/2001  
AND CLAIMS BENEFIT OF 60/267,944 02/12/2001  
AND CLAIMS BENEFIT OF 60/247,242 11/13/2000  
AND CLAIMS BENEFIT OF 60/247,232 11/13/2000  
(\*) Data inconsistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
\*\* 01/25/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 67	<b>INDEPENDENT CLAIMS</b> 3
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

004897

**TITLE**

Data security system and method responsive to electronic attacks

<b>FILING FEE RECEIVED</b> 793	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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